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FACSIMILE TRANSMITTAL SHEET

TO: Examiner John A. Jeffery - Group Art Unit 3742

FIRM/COMPANY: Mail Stop Amendment / USPTO

FACSIMILE NUMBER: 703.872.9306

**CONFIRMATION
TELEPHONE:** 703.306.4601

FROM: Anne Marie Leavy for Edward J. Lynch

DIRECT DIAL: 415.371.2217

DATE: January 10, 2005

USER NUMBER: 5121

FILE NUMBER: Atty Docket No. R0367-01003, USSN 10/170,448

TOTAL # OF PAGES:
(INCLUDING COVERSHEET)

MESSAGE: Attached is an *Amendment in Response to Office Action Mailed 09/20/2004* and *Terminal Disclaimer (by Attorney)*.

NOTE: Original will not follow

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of *Burbank et al.*For: **IMAGEABLE BIOPSY SITE MARKER**

Serial No.: 10/179,448

Filed: November 21, 2003

Atty. Docket No.: R0367-01003

Examiner: J. A. Jeffery

Group Art Unit: 3742

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CERTIFICATE OF MAILING/FACSIMILE PURSUANT TO 37 C.F.R. §1.8

I hereby certify that these papers are being sent by facsimile to (703) 872-9306, addressed to Examiner J. A. Jeffery, at Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 10, 2005, in San Francisco, CA.


 Anne Marie Leavy

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

- Transmitted herewith for filing in the above-identified patent application is an Amendment and Response to Office Action Mailed 09/20/2004 and Terminal Disclaimer by Attorney.
- Claim Fee Calculation

 No additional claim fee is required.

 X Amendment increases number of claims or multiple dependencies.

Additional Claim Fee Calculation

Description	Fee Code	Claims	Extra	Rate	Fee
Independent Claims	2201	5 - 4 =	1 x	\$100=	\$100
Total Claims	2202	46 - 31 =	15 x	\$25=	\$375

Fees Due \$475

- Additional fees: Terminal Disclaimer fee under 37 CFR 1.20(d) \$65
- Additional fees: Request for Extension of Time for one (1) month from December 20, 2004 to January 20, 2005 pursuant to 37 CFR §1.17(a)(1), (Fee Code 2251) \$60

Total Fees Due \$600

- Payment of Fees

 Enclosed is a check for the total fees due in the amount of _____.

 X The Commissioner is authorized to charge any additional fees and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atty. Docket No. R0367-01003.
 A duplicate copy of this document is enclosed.

By: 

Edward J. Lynch
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 SF68560.1

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) Examiner: J. A. Jeffery

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Anne Marie Leavy

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Commissioner for Patents
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